

<b>To:</b> Department of Consumer Affairs Office of Human Resources Selection Services and Recruitment Unit 400 R Street, Suite 2000 P. O. Box 980428 Sacramento, CA 95798-0428 ATTN: Karen MacKenzie, Manager <a href="mailto:Karen_MacKenzie@dca.ca.gov">Karen_MacKenzie@dca.ca.gov</a> 916 322-2952 Fax: 916 327-5857	<b>From:</b>
	<b>Board/Bureau/Division:</b>
	<b>Phone:</b>
	<b>Manager's Name:</b>
Title of Classification for which you are requesting an examination:	
Why are you requesting this examination?	
Do you currently have any vacancies or do you anticipate any vacancies in this class? If yes, How many:	
If there is a current list of eligibles, why is there a need for a new examination?	
Do you have an approved freeze exemption? Y N	
Do you have an employee who is currently on a Training and Development Assignment to this class? If so, who is the employee?	
What date was the employee placed onto the T&D?	
If we approve this request, whom would you recommend as subject matter expert(s) for examination planning? (The SME can be the same classification as this request or one-to-two levels higher, but should be someone who has performed the duties of the class.)	
Name:	Title: Phone:
Name:	Title: Phone:
Name:	Title: Phone:
Do you need this examination administered by a specific date? YES NO	
If yes, when?	
Why do you need the examination administered by that date?	

SHADED AREA FOR SS&R USE ONLY									
Current List Date		Number Active on List		Hires Made From List			Recommend	Approve	Deny